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PREVENTING CHILD ABUSE AND NEGLECT

A Case Study of PARE (Physical Abuse
and Neglect Reduction Effort)

evaluation

of nine

comprehensive

community-based

child

abuse

and neglect

Prevention

programs

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PREFACE

The National Center on Child Abuse and Neglect (NCCAN) funded nine comprehensive community-based child abuse and neglect prevention projects in 1989. Through this 5-year grant program, NCCAN encouraged community groups, ranging from community-based organizations and child welfare agencies to universities and hospitals, to join together with other community forces to prevent physical child abuse and neglect. NCCAN underscored the intent that the projects were to be both community based and comprehensive—that they should network with and encourage the involvement of many community service providers.

The nine prevention projects represented diverse target communities, emphasized different objectives and approaches, and implemented different interventions in response to the NCCAN initiative. In choosing to fund such diverse projects, NCCAN sought to assess the effects of the different approaches based on the geographic, ethnic, demographic, and economic context of each community. The projects' approaches to preventing child abuse and neglect also reflected factors such as the philosophy of the project's architect, the project's history in the community, and requirements of other sources of funding. Thus, this grant program provided a singular opportunity for NCCAN and the prevention field to learn the strategies that worked best to focus community resources on preventing child maltreatment and the types of communities in which they worked best.

CSR, Incorporated, conducted a national evaluation of the nine prevention projects to document their experiences and contribute to an understanding of ways to mediate risk factors and strengthen families through solid partnerships with their

communities. The evaluation included a series of in-depth site visits to each of the nine projects; analyses of project progress, evaluation, and final reports; and analyses of process and outcome data collected by the projects. In addition, information was obtained through meetings and conversations with project staff and through project publications such as manuals, newsletters, and program logs. Results of the evaluation are reported in the following:

- A set of nine case studies that reflect the uniqueness of each project and the complexity of their individual experiences;
- A cross-site analysis of the experiences of the nine projects, incorporating data collected by both CSR and the projects and presenting policy recommendations derived from CSR's findings;
- A “lessons learned” report discussing the most important findings and experiences of the projects.

The information presented in these case studies and reports' is intended to contribute to the effectiveness of prevention programs by highlighting how these nine communities established comprehensive projects for strengthening families and focusing community resources on preventing child maltreatment and by providing an understanding of what worked in those communities and why. As the prevention field increasingly recognizes that comprehensive and communitywide efforts are required to respond to the urgent problems that lead to child maltreatment, the experience of projects such as these will provide valuable lessons on which to build in policy and program development.

¹ Note that these case studies and reports primarily cover the base period of the NCCAN demonstration grant, which was 1989 through 1994.

PHYSICAL ABUSE AND NEGLECT REDUCTION EFFORT

This report describes Physical Abuse and Neglect Reduction Effort (PARE), one of nine demonstration projects funded by the National Center on Child Abuse and Neglect (NCCAN) to provide models of collaborative, community-based strategies for effectively preventing child maltreatment. These prevention programs encouraged community groups to join forces with other community agencies to prevent child abuse and neglect. PARE was developed by the Exchange Club Center for the Prevention of Child Abuse (ESCAPE), located in Carolina, Puerto Rico.

Sociologists generally agree that child maltreatment arises from complex interactions of parental characteristics, children's attributes, and environmental and social stresses. This case study report discusses the environmental factors and indicators of social disruption associated with increased risk for child abuse and neglect in Puerto Rico. It also provides a comprehensive overview of all aspects of PARE's program design and operations as well as the process and outcome evaluations conducted by ESCAPE. This information will be used to select exemplary programs for further study, to explicate grantee outcome data, and to develop cross-site comparisons with other programs.

Information for this report was obtained from materials provided by the grantee; reference materials from the University of Puerto Rico; the library at Beatriz Lasalle's School of Social Work; written materials from the Office of the Commonwealth of Puerto Rico in Washington, D.C.; *El Dia*, the local newspaper in Puerto Rico; a review of professional journals; the author's personal resources and experiences while working and growing up in Puerto Rico; and in-depth site visits during the second and third year of program operation. In addition, *El Dia* was consulted daily during 1994 to review information on community issues, social conditions, and topics that were relevant to child abuse.

CSR conducted site visits to collect data, provide technical assistance to the program in meeting the requirements of the national evaluation, and aid the program in its efforts to design and implement its own internal program evaluation. A bilingual evaluator who is fluent in English and Spanish conducted the site visits, which were conducted up to four times per year between October 1992 and December 1995.

OVERVIEW OF PUERTO RICO

The island of Puerto Rico is located in the Caribbean Sea approximately 1,000 miles east-southeast of Miami, Florida. It is a relatively small island, approximately 100 miles long and 35 miles wide, with a population of 3,500,000 people (approximately 1,000 persons per square mile). Approximately 2.5 million Puerto Ricans reside in the United States, and substantial emigration to the United States occurs each year.

Puerto Ricans on the island constitute a racially homogeneous group, being of Spanish, African, and Taino Indian descent. Puerto Ricans are differentiated according to their last names, professional roles, and business enterprises, which translates into their social positions.

Discrimination in Puerto Rico is more likely to exist on the basis of economic status and social class than on racial background. Puerto Ricans on the island experience the same socioeconomic conditions that Hispanics on the mainland experience, but they are in a country in which the government and political system are managed by Puerto Ricans, although they are closely monitored by the U.S. Congress.

During the past 50 years, Puerto Rico has experienced a rapid transition from a rural, agrarian society to a more urban, industrial, commercial economic structure. The economy has been transformed from one based on the revenues of a single crop (i.e., sugar cane) to one based on manufacturing. In the process, the standard of

living has increased. Yet unemployment on the island remains high, registering approximately 14 percent in 1996, because of the local economy's failure to provide a sufficient number of new jobs for the fast-growing population. According to the 1990 census, 60 percent of all families, were nuclear families, and 27 percent were headed by single females.

Despite the progress achieved by Puerto Ricans, and in spite of Puerto Rico's modern industrial society, approximately 60 percent of the population lives below the U.S. poverty level and requires some type of government assistance-either food stamps or a capped welfare payment averaging \$75 per month. The rush to industrialize created a number of problems for Puerto Rico. For example, the Commonwealth stopped growing its own food. About 85 percent of the food Puerto Ricans eat is imported-mostly from the mainland-and sold at **inflated** prices. The cost of living is **higher** than what the average Puerto Rican can afford. The situation has been further exacerbated by the fact that while the government **focused on** industrialization, little attention has been given to neighborhood improvement projects or **services** to strengthen the family unit.

Industrialization also brought social and economic changes to the island that profoundly affected the community setting and family structure. As a result, Puerto Ricans have experienced a lack of continuity in their traditions and a breakdown of traditional norms and values. As with any rapid and dramatic change, there has been a serious lag and maladaptation of traditional cultural values, which often have been reflected in childrearing difficulties. In Puerto Rico, traditional values and modern values coexist, resulting in a combination of unstable, incoherent, and constantly **changing** behavioral norms. Metropolitan areas have exhibited increased crime, violence, and poverty, while rural sectors have shown more traditional, stable social patterns.

Indicators of social disruption associated with increased risk for mental illness have become pervasive in Puerto Rico, including high rates of

unemployment, divorce, and crime and high consumption of alcohol. These changes, in addition to the poor socioeconomic status of the population, have created a situation of high risk for the development of psychopathology. In addition, mental health resources in Puerto Rico have been inadequate, and specific budgetary allocations for child and adolescent mental health services have been even more limited than those for adults.

Domestic Violence

Recent studies suggest that a relationship exists between child abuse and domestic violence. This pattern has been seen in Puerto Rico, where domestic violence has become a serious problem. The police reported a total of 11,263 cases of domestic violence in 1995, and an average of 28 to 30 deaths per year have been directly linked to domestic violence over the last 3 years.

Local observers and women's advocacy groups have pointed out that the Puerto Rican government has failed to recognize domestic violence as a serious problem; this has limited the capacity of institutions to help victims of domestic abuse. Only three shelters can be found in the United Way directory. A few religious organizations have established small shelters, but the limited number of beds available do not meet the needs of the population. In addition, the community has lacked agencies to support families experiencing conflict, domestic violence, and divorce. All these factors have impacted and weakened the family unit in Puerto Rico.

Child Abuse Prevention

The number of child abuse cases in Puerto Rico has been increasing at the same rate as other forms of violence. The Department of Social Services, charged with protecting children, is overwhelmed with cases. The San Juan regional office has only 14 caseworkers to verify an average of 700 referrals per month; this indicates that many cases are never investigated. The department is part of the island's large bureaucratic system and has limited funding to recruit competent

professionals and hire the staff needed to develop effective programs. Although a few new community-based agencies have **been** created in the last few years, the number of programs available still does not meet the population's need.

In spite of local efforts, child abuse prevention in Puerto Rico has faced some limitations. Many agency staff have suggested that a lack of political will has prevented the prioritizing of child and family services, and no advocacy groups currently focus on children's concerns. Furthermore, U.S. advocacy programs such as the Children's Defense Fund and the Child Welfare League do not operate in Puerto Rico, and the island has had limited access to funding from private foundations, corporations, and philanthropic institutions because many limit their funding to programs on the U.S. mainland. Only two small Puerto Rican foundations are listed on the national registry of foundations, and they are overwhelmed with requests for funding. Most of the available funding is funneled through the Social Services Administration and is used exclusively by that agency. Interviewees state that government social agencies **have** monopolized the funding for years, preventing the private sector from developing community-based organizations.

THE SAN JUAN, CAROLINA, AND GUAYNABO COMMUNITIES

PARE targeted three communities within the San Juan metropolitan area—the cities of San Juan, Carolina, and Guaynabo. These communities were chosen for their socioeconomic characteristics and high-risk factors.

San Juan is the capital city of Puerto Rico and comprises 18 barrios with a dense population of 437,745. The geographic area is 47.8 square miles, making the population density approximately 9,100 persons per square mile. Approximately 45 percent of the population lives below the poverty level, and the majority of residents are concentrated in high-rise buildings and public

housing developments. There are sectors of middle-class housing with pockets of low-income neighborhoods. The older housing developments in the southern portion of old San Juan are well known for extreme poverty and social problems, which attract crime and drug trafficking.

Carolina is located approximately 20 miles from San Juan and has a total population of approximately 178,000, which includes about 46,000 families. The geographic area of Carolina is 45.4 square miles, making the population density approximately 3,900 persons per square mile. Approximately 37 percent of the population are living below the U.S. poverty level. The barrios and housing projects of Carolina have a high incidence of illicit drug activity. On the positive side, Carolina also is the center for several important pharmaceutical companies that provide high-tech and blue collar employment.

Guaynabo has a population of approximately 93,000, which includes about 24,500 families. The geographic area is 27.1 square miles, making the population density approximately 3,500 people per square mile. Approximately 37 percent of the population lives below U.S. poverty level. Guaynabo is well known for its middle- to upper-class housing areas and often is considered a bedroom community of San Juan. However, downtown Guaynabo is surrounded by low-income communities and semirural areas. **Guaynabo's** perimeter includes an industrial section with several garment manufacturers that employ blue collar workers.

GRANTEE ORGANIZATION: EXCHANGE CLUB CENTER FOR THE PREVENTION OF CHILD ABUSE

ESCAPE was established in Puerto Rico in 1983 as an initiative of the National Foundation Exchange Club for the Prevention of Child Abuse. ESCAPE is a private, nonprofit organization that is affiliated with the National Foundation. The philosophy of the National Foundation is **based** on a psychosocial approach to child abuse prevention that considers

both the psychological development of individuals and the effects of their social environment upon their behavior. As an affiliated organization, ESCAPE follows the same philosophy, to diminish the tragedy of child abuse. It operates independent of the foundation through a 15- to 18-member board of directors; its membership is composed of 30 percent National Foundation members and 70 percent community representatives. A core full-time staff of eight as well as about eight volunteers plan and develop most of the activities.

With NCCAN funding, the grantee expanded services and established itself as the leading child abuse prevention program on the island. At the time the grant was awarded, ESCAPE was the only community organization in Puerto Rico that focused on child abuse prevention. At the present time, a number of organizations have initiated independent prevention efforts throughout the island, which can be attributed to ESCAPE's initial efforts

PROGRAM DESIGN

Through the PARE grant, ESCAPE developed a comprehensive model that impacted children, families, professionals, and the private and public sectors of the community. One of the primary aims of ESCAPE was to provide intervention strategies for families who were at risk for abuse, or who abused their children, in an effort to stop the cycle of child abuse in future generations. Accomplishing this goal without dissolving the family unit was a key objective. At the community level, ESCAPE sought to involve key government representatives, community-based organizations, and the community at large to increase awareness of issues related to child abuse and support families at risk to ultimately decrease the incidence of abuse.

ESCAPE's main office is located in downtown Carolina, is accessible by public transportation, and is within walking distance of major social service programs, municipal offices, and the public

hospital. The overall atmosphere of the ESCAPE office is one of friendliness, informality, and warmth.

The PARE program had the following goals:

- To reduce the incidence and prevalence of physical child abuse and neglect;
- To promote interagency collaboration in the area of child abuse prevention;
- To enhance public knowledge and awareness of child abuse and neglect;
- To improve the knowledge of elementary school children about abuse and how they can protect themselves;
- To improve parenting skills of high-risk pregnant women and new mothers;
- To improve the knowledge of the Puerto Rico Department of Anti-Addiction Services' staff about child abuse;
- To reduce parental stress related to child care needs;
- To improve at-risk parents' knowledge of healthy parenting practices;
- To provide supportive counseling and referral services to community resources; and
- To provide opportunities for mutual support and to promote positive parenting among abusive and at-risk parents.

PARE's approach was based on a model of community-based services, including a primary prevention program designed to provide comprehensive services to reduce child abuse among high-risk populations in three communities. The project was operated from the main office in Carolina, and two smaller offices were established in Guaynabo and San Juan. In each of these communities, the project targeted specific

populations. In Carolina, the program targeted teen mothers, in Guaynabo the program targeted families that have children with developmental disabilities, and in San Juan the program targeted women impacted by domestic violence.

ESCAPE is a viable organization that has grown and expanded its services from the San Juan metropolitan area to San German, on the island's west coast. It has a 14-member board of directors, which oversees agency policy and budgetary issues. The board did not have an active role in developing activities or services; its role has been that of providing support rather than guidance.

Since its implementation, the structure of the demonstration project did not change. Operationally, the project's strength came from the expertise of the project director and the staff's enthusiasm and commitment; their educational backgrounds are in psychology, social work, education, and human development. The staff of PARE included approximately 10 full-time employees; key staff stayed with the project throughout the grant period. In addition, the project recruited volunteers from the community to provide direct services to participating families. ACTION volunteers, part of a larger Federal volunteer program called VISTA, were used to assist with the coordination of activities, fundraising, and recreational and community organizing at a housing project in Carolina.

PARE provided an array of preventive services identified as most promising for families at risk. A group of experienced professionals and volunteers provided education, training, counseling, and support services to the targeted populations. A team composed of volunteer coordinators, an interagency coordinator, a parent laboratory coordinator, a support group facilitator, and a component of ACTION volunteers were responsible for the program's public awareness campaign, three respite centers, an interagency task force, and parent education activities. All these services represent ESCAPE's efforts to provide support services to families at risk for child abuse.

ESCAPE views child abuse as a complex, multifactor, systemic social phenomenon. PARE was designed to be family oriented and emphasized self-help and volunteer action. The demonstration model followed an ecological approach emphasizing four domains-individual factors, family factors, community factors, and cultural factors. The PARE model included a variety of programs designed to impact these four domains.

ESCAPE implemented the following NCCAN components:

- Community-based interdisciplinary task force involving representatives from government and private organizations to plan, develop, and implement a coordinated prevention effort;
- Islandwide public awareness program to educate the general public about the problem of child abuse and to promote positive parenting;
- Three respite centers in three targeted communities to provide services to low-income parents who are attending social services appointments, medical appointments, or training in an effort to reduce parental stress and provide safe alternative care for the children;
- Prevention education for school-age children through a curriculum that focuses on helping them protect themselves from potential abusive situations;
- Prevention education, provided at several public clinics, for new and experienced mothers that focuses on well-baby care, child development, and positive parenting;
- Support services and case management for high-risk mothers or mothers-to-be within the three targeted communities;
- Public education (e.g., the Parent Laboratory);
- Parent support groups in each targeted community;

- * Prenatal and parenting education with support services to help new parents acknowledge and reinforce positive parenting skills; and
- Coordination between child abuse and neglect services and domestic violence programs.

PARE also provided training and conducted public education training for service providers, teachers, and parents through local agencies and schools. Prevention materials also were distributed at these training sessions. The request for training remained constant throughout the grant period because ESCAPE is one of the few organizations that has developed written material and provided updated information on the subject of child maltreatment and prevention.

The following sections discuss PARE's interagency task force, public awareness campaign, respite centers, life skills curriculum, educational curriculum for prenatal clinics, Parent Aid Program, and Parent Laboratory.

Interagency Task Force

ESCAPE's Interagency Task Force, composed of approximately 14 agency representatives, was the first task force established on the island to address child abuse prevention. The majority of its members represented government agencies, because only a few private agencies in Puerto Rico worked with abused children and families facing domestic violence.

The task force was an important component of the program and a vital addition to the community. Its purpose was to increase awareness of child abuse and promote interagency coordination among public and private agencies serving children and families. The structure of the task force remained constant throughout the demonstration period, with the project director heading the task force and offering input, guidance, and continuity. The task force drew a relatively stable and active group of members, who worked in small groups or committees focusing on tasks established by the task force as a whole. The task force's main task

was to review policies regarding the reporting of child abuse as they relate to the 1980 Child Protection Law. Each task force member agreed to review child protection laws to ensure their agencies' compliance with the minimum standards established by law for child abuse-reporting policies. They revised existing regulations and established clear policies related to child abuse reporting. Agencies that did not have written policies developed policies and institutionalized them. A full-time staff member was assigned to assist task force members with this effort. This coordination was essential for keeping the task force members enthusiastic and participating despite their busy work schedules. The task force also developed a protocol for child abuse reporting that was adopted by the Commonwealth's Departments of Education and Justice.

The task force can be credited for promoting collaboration and bringing key government representatives together to focus on issues pertaining to child abuse prevention. The membership of the task force included head secretaries from government departments who had authority to influence and change policies within their departments. Most members occupied high-level positions and were highly visible and well respected on the island.

A network was developed to connect key departments such as the Departments of Education, Social Services, and Justice with the police in an effort to develop internal communication and improved services. This network facilitated referrals and services as well as helped cut through the thick bureaucracy within these departments. In addition, task force members recruited community leaders to infuse the task force with new energy and ideas. The task force also developed an internal protocol for government agencies to use when reporting incidents of child abuse.

Difficulties were encountered during the organization and implementation of the task force. Attendance by Department of Social Service representatives often was sporadic, and high staff turnover in that agency resulted in high turnover of

representatives on the task force. However, after 3 years, the task force developed a stable, effective working group of key individuals from government agencies, including the Department of Social Services.

Public Awareness Campaign

PARE conducted a massive public awareness campaign to increase awareness of child abuse on the island and to promote public involvement and community action. The campaign covered four major types of child abuse—physical abuse, emotional abuse, sexual abuse, and child neglect. The year was divided into four segments. Each segment focused on one type of abuse targeting a specific population of either fathers, single mothers, or housewives. It was initiated with a press conference attended by representatives of the local media.

The first phase of the campaign began in February 1991 and ended in January 1992. The first phase campaign slogan was “Solo Tu Puedes Prevenir El Abuso De Menores”—Only you can prevent child abuse. Public service announcements (PSAs) were presented by 12 television stations and 27 radio stations. To appeal to an adult audience, a child actor (a girl) talks about the problem of child abuse in Puerto Rico and asks the audience to do something about it. A reporter in the background provides specific information about the prevention program.

The second phase, conducted during 1993 and 1994, used the slogan “Ponte en su Lugar”—Put yourself in their place. The campaign covered physical abuse and encouraged changes in childrearing practices, changing from authoritarian to nurturing practices and improving communication.

Concurrently with the PSAs, the program engaged in a public relations campaign to support and reinforce the messages being delivered through the PSAs. The campaign targeted public and private organizations that directly or indirectly addressed child abuse issues to gain input and generate public

discussions on the subject of child abuse. The program also encouraged local experts in the field to write articles about child abuse for publication in local newspapers.

PARE also conducted a public campaign entitled “Don’t Shake the Baby” in conjunction with Child Abuse Prevention Month in April 1994. The campaign attracted media attention and ended with a symposium targeting psychologists and health and other service providers.

Over the course of the demonstration period, PARE generated considerable media attention. The project director and staff participated in at least two local radio talk shows per month focusing on the subject of child abuse in Puerto Rico.

Respite Centers

The goal of the respite centers was to provide drop-in child care services to low-income families. PARE established respite centers in San Juan, Guaynabo, and Carolina. The three centers were located on the premises of local churches within the targeted communities, were accessible to public transportation, and were overseen by an advisory board.

ESCAPE introduced respite centers to Puerto Rico. The centers were developed in response to the changing society on the island. For many years, temporary child care was provided primarily by relatives or neighbors. Even though paid child care provides an alternative to family care, low-income women have far less capacity to use child care services than middle-class women. Because deprivation and stress can precipitate child maltreatment, PARE offers respite care for low-income mothers so that they do not have to subject their children to the long waits in waiting rooms at bus stops, and in hospitals. These respite centers proved to be an effective way of reaching a vulnerable population and were a viable option otherwise not available to low-income families.

Development of the community respite centers resulted from a needs assessment conducted in the

targeted communities. Survey results indicated both that the services were needed and that the community would welcome the program. After numerous meetings with church boards and committees, a partnership was established with three Protestant churches. The churches agreed to do the following:

- Offer their facilities free of cost;
- Serve as members of an advisory board;
- Accept ongoing training on issues such as child development, child abuse, and first aid;
- Consider adopting the centers once the grant ended; and
- Accept a written agreement clarifying the church's role and responsibilities.

PARE agreed to provide the following:

- Salaries for part-time staff;
- Recruitment and training of staff;
- Overall supervision; and
- Assistance in the process of institutionalization.

After the initial year, the concept has been well received by the churches, the community, and the program participants. Staff attributed the slow start to people's fear of being coerced into joining the church. The project director stated that the key to engaging the church was presenting the program as protecting children **and** contributing to child abuse prevention. She also stated, "It should appeal to [the churches'] Christianity and moral values."

The respite centers provided free drop-in day care services for children from 3 months to age 4 years old whose parents needed temporary **child** care while attending medical appointments, their jobs or training, and social services appointments. This quality child care was an alternative for high-risk mothers who might otherwise **been** forced to leave

their children unattended or exposed to high-risk situations. Services were provided Monday through Friday from 6:30 a.m. to 2:30 p.m. To qualify for services, parents had to have a low income and reside within the targeted community. Approximately 150 children per month benefited from the respite centers.

The staff of each respite center included a supervisor and three volunteer caretakers as well as an advisory board composed of a church member, the church pastor, a volunteer, and a parent representative. This board did not have decisionmaking power but provided guidance and support to the centers and served as a liaison between the respite center and the church. PARE provided overall supervision and management of the respite centers as well as in-service training for all staff and volunteers. The training included child abuse prevention, first aid, child development, discipline, and stress management. In addition, staff were trained to identify families having problems managing their children and other risk factors for abuse. At-risk families were referred for services and treatment as needed.

The respite centers provided the opportunity for churches to support and provide concrete services to families **in need**. One pastor reported several internal changes taking place in his church as a result of this program. The respite center served as a catalyst for new visions for the congregation. For example, the church was more receptive to social action, including serving the homeless, high-risk youth, and families. The pastor also stated that he intended to continue the respite program and was trying to locate funding from other agencies to continue center operations after the demonstration grant ended. Through the respite centers, these churches became enablers in the prevention of child **abuse and claimed** ownership of the respite centers. After the NCCAN funding ended, the respite centers continued under the churches' auspices.

Life Skills Curriculum

Due to a lack of prevention curricula in the schools on the island, PARE developed a prevention curriculum for elementary students called “Cuidate Mucho”—Take care of yourself, or protect yourself. The curriculum, funded by a grant from the Puerto Rico Community Foundation, was used to teach elementary school children to identify and avoid harmful situations and to protect themselves from physical and sexual abuse. The curriculum presented general information about child anatomy, feelings, **good** and bad touching, and steps to take when molestation occurs. The curriculum also encouraged children to seek help from trusted adults such as their parents, school staff, or other professionals. The curriculum also aimed to help children who are at higher risk of encountering abusive situations develop decisionmaking skills. A **12-minute** video was developed to accompany the curriculum; it focused on how children can protect themselves from physical and sexual abuse and provided recommendations regarding personal safety.

Three age-specific prevention curricula were developed for children in kindergarten through grade 2, grades 3 and 4, and **grades** 5 and 6. Each curriculum included 12 modules focusing on a subject related to child abuse prevention as well as a teacher’s guide with stories and pictures, a workplan, and suggested life skills activities. The implementation of the curricula involved collaboration with the Department of Education. PARE provided training to social workers, parents, and teachers on the subject of child abuse and using the curricula. Subsequent meetings with the teachers focused on evaluating their experiences using the curricula and obtaining feedback. A total of 470 children in 9 schools received the curricula.

The curricula were a needed resource in schools serving children from multiproblem homes. The social worker explained that the children in the community often were exposed to risky situations with little supervision and too much television violence, which often provides distorted images of reality. Feedback from teachers **using** the curricula

was positive. Some teachers indicated that the materials were easy to understand **and very** instructive, and a social worker stated that the curricula allow children to talk about subjects never mentioned at home.

Teachers also noted that resources like the curricula are practically nonexistent on the island and that the schools operate with very limited funding for supplies and equipment. They indicated interest in having information about other available educational materials. Innovative materials on this subject are not being developed by the school system or the government because of lack of funding.

PARE also provided training to the other schools staff on child abuse issues, types of abuse, detection, local protection laws, reporting, and intervention strategies. The training was offered to 138 social workers in the San Juan region. Although social workers from the elementary schools were primary targets, social workers from the intermediate schools also were included.

Educational Curriculum for Prenatal Clinics

PARE developed a curriculum called “**Punto de Partida**” for high-risk pregnant women who attend public health clinics in the San Juan region. The goal of the curriculum was to improve parenting skills and foster child-mother bonding among a group of high-risk pregnant women. Development of this curriculum was funded by a grant from **the** Puerto Rico Community Foundation. The curriculum provided information on prenatal care, well-baby care, child development, child discipline, and positive parenting in an effort to promote positive parenting and improve childrearing practices. The curriculum was divided into three sections and seven modules. A videocassette was produced to complement the curriculum and to be shown in clinic waiting rooms.

Implementation of this curriculum included establishing collaborative relationships with top-level administrators of the Health Department to gain entry into the local clinics. ESCAPE

conducted a needs assessment at the local clinic level to determine gaps in services, level of information needed by the patients and level of information being provided, characteristics of the population attending the clinics, services being provided at the clinic, and the perceived needs of the staff. The information collected helped PARE in preparing training for the clinic staff.

Six training sessions on the use of the curriculum were provided to physicians, nurses, social workers, and supervisors.

The general atmosphere and conditions at the local clinics were less accommodating than those at the schools. Clinics in general are more likely to be understaffed, busy, and crowded with patients. Some staff resisted the additional task of providing curriculum lessons in the appropriate sequence. In addition, some clinics did not have the appropriate equipment (e.g., a videocassette player). High staff turnover also was a problem. Nevertheless, PARE made it a point to identify a willing partner at each clinic who would facilitate the implementation process.

Not all clinics provided the curriculum lessons as stipulated by the manual. At some clinics, staff were enthusiastic at the beginning but became discouraged by lack of participation or limited time and space. PARE did not have the resources to monitor the program or offer other alternatives. The curriculum also was provided at several clinics located in rural communities, which generally were less crowded, and the outcome was better.

Parent Aid Program

The Parent Aid Program was another important component that provided support to high-risk families through the use of volunteers who were trained and supervised by PARE's professional staff. The use of volunteers proved to be a cost-effective strategy and one that fit well with the Puerto Rican culture. The volunteers were available around the clock, were not overburdened with heavy caseloads, and served as a kind of extended family for the clients.

The program impacted a total of 215 families between 1992 and 1995, including 275 adults and 435 children. Overall, the program focused on the following three high-risk groups in the target population: teenage mothers, families experiencing domestic violence, and families with children who have developmental delays. The Carolina office targeted teenage mothers and new mothers. the Guaynabo office targeted families involved in domestic violence, and the San Juan office targeted families with children with developmental delays.

Each volunteer worked with one family. Families engaged in a working relationship with a volunteer, who provided supportive counseling, taught improved parenting skills, and assisted in developing the parents' problemsolving skills to reduce stress and family strife. The volunteer-family relationship provided a unique blend of support and friendship; the volunteer was much like a member of an extended family. Some volunteers included the participating families in activities with **their** own families and provided opportunities for them to participate in activities not otherwise available to low-income families.

PARE's unique approach of using volunteers to work directly with the families proved to be effective. A total of 702 volunteers were recruited, and they allowed PARE staff to work under more flexible schedules, carry lighter caseloads, and provide more quality time for individual clients. The table on the following page shows the number of volunteers recruited in the three target communities from 1989 to 1995.

The volunteers were various ages and had diverse experiences, education, and backgrounds. PARE looked for volunteers who had the ability to listen and empathize and who had some related experience. During a focus group, some volunteers stated that their reason for getting involved included a sense of responsibility toward society ("I felt I needed to do something for my people").

Volunteers were recruited through the local newspapers and PSAs, by word of mouth, and through self-referral. Volunteers included men and

Volunteers Recruited Since Grant Inception							
	1989	1990	1991	1992	1993	1994	1995
San Juan	47	32	28	16	31	22	19
Carolina	119	67	36	24	31	49	24
Guaynabo	N/A	22	24	34	36	22	19
TOTAL	166	121	88	74	98	93	62

women ages 21 to 55 with a high school diploma or higher. After a rigorous selection process, volunteers were assigned to a family based on personality, interests, work history, educational background, and age.

Because the volunteer served as guide, mentor, and friend, attempts were made to match volunteers and parents based on the mothers' needs and the personalities of the mother and volunteer. Volunteers were closely supervised and guided by the project coordinator. Each volunteer worked with a mother and members of the extended family. (The nuclear family in Puerto Rico **does not** function independently but maintains social interactions of reciprocal help with members of the extended family.)

An initial 2½-day training session was provided to volunteers on child maltreatment, sexual abuse, domestic violence, child development, mother-child bonding. Volunteers met as a group on a monthly basis to learn from each other's experiences. During the monthly meeting, training was provided on child development, motherhood, nutrition, vaccination, and other subjects of interest. Training also was conducted using a 20-minute short film in which local artists acted **out** a fictional story of a single mother and her g-year-old daughter who are referred to ESCAPE for services. The film followed the assigned volunteer as she worked with the young mother. The film, produced at a reduced price **by** a local film company, used an ESCAPE coordinator as an actor.

Each volunteer was supervised **by** a volunteer coordinator, who met **weekly** with the volunteer to follow up on the progress of clients and families. Each volunteer kept progress notes and submitted them to the coordinator.

The Parent Aid Program was successful in part because of a high sense of social responsibility toward the disadvantaged and of helping others, which is embedded in the Puerto Rican tradition. This phenomenon, along with familism, facilitated recruitment of volunteers and collaboration with other professionals to conduct this family support program.

Parent Laboratory

The Parent Laboratory was created to promote public education and awareness regarding child abuse and neglect issues. PARE's message promoted positive childrearing practices and responsible parenting as a way of preventing child abuse. The staff were responsible for providing public presentations to service providers, professionals, and parents and for distributing prevention information. The staff also developed new prevention materials in Spanish. Volunteers established and operated a daytime helpline.

The laboratory operated with one full-time staff member with a master's degree in social **work** and extensive experience working with high-risk populations in New York. This individual oversaw provision of the following:

- Educational materials;
- Lectures and workshops on child abuse;
- Parenting classes;
- Support groups for children and parents; and
- Information booths at local conferences.

Lectures and workshops were provided to public and private organizations within the targeted communities. Most of the program's educational materials were developed by program staff after extensive research of local resources and materials from the United States. These materials then were translated into Spanish, adapted, and distributed to program participants.

Support Groups

Support groups were developed when the PARE staff realized that parents needed support and guidance to cope with socioeconomic issues as well as with parenthood. A support group was established in each targeted community (San Juan, Carolina, and Guaynabo), and the groups met in twelve 2-hour sessions. Group participation and involvement varied from group to group. The average number of participants was 7 to 10. The support groups were led by the coordinators, most of whom had master's degrees in psychology, social work, and/or human development.

The support groups guided participants through two stages of therapy. The first stage focused on empathy or intimacy; participants got to know each other and found commonality among themselves. The second stage emphasized education and acceptance; participants were encouraged to accept that they had an abuse problem or at least had parenting difficulties. During this stage, parents start becoming more receptive to information and the therapeutic model.

A focus group of support group participants in Carolina generally viewed membership in the support group as a positive experience. Most

participants had gained insight into parenting and the ability to better understand their children's behavior.

Training

PARE provided in-service training for their own staff and for local and ACTION volunteers on topics such as self-esteem, child development, child maltreatment, domestic violence, and substance abuse. For the training, the program used staff with appropriate expertise and outside speakers.

Other Activities.

Other activities included the annual children's event and family summer camp.

Annual Children's Event

Each year of the demonstration period, ESCAPE organized an annual children's event to celebrate Child Abuse Prevention Month. The goal of the event was to increase awareness and provide a fun-filled day of activities for participating children and children from schools in adjacent communities. Each year a theme related to prevention was chosen, and activities such as a drawing contest were planned around the theme. For example, one year's theme was "It takes a village to raise a child." Approximately 1,000 children from the San Juan metropolitan area and adjacent areas in Carolina attended the event each year.

In addition to music and fun activities conducted by local artists and clowns, government agencies and community organizations conducted workshops for the children and operated information booths to promote their services and programs.

Organizations represented at the 1994 event included the Police Department (representing the D.A.R.E. [Drug Abuse Resistance Education] program and other community programs) and the Fire Department. Local companies, such as Frito Lay, 7-UP, and Holsum, donated refreshments and snacks. Local children's television actors also joined the event.

Christmas provided an opportunity for a celebration of Three Kings Day, the holiday on which children in Puerto Rico receive their Christmas toys. ESCAPE mobilized and involved community organizations and businesses to donate money and toys. From 1989 to 1995, 1,400 children (200 per year) received toys and their families participated in the Three Kings Day event.

Summer Camp

In 1991, 1993, and 1994, PARE provided a summer camp free of charge to program families. The summer camps provided an opportunity for families (a total of 283 participants) to share quality time and enjoy positive activities promoting family unity. The camps were held in the countryside over 3-day weekends.

Support for Other Community Efforts

PARE also supported the efforts of other community organizations. Staff participated in community marches and rallies against domestic violence promoted by other organizations.

Program Staff

The PARE program staff included a project director; an assistant project director; volunteer coordinators in San Juan, Carolina, and Guaynabo; coordinators for the support groups, the Parent Laboratory, and the interagency task force; and support staff.

Much of the program's success can be attributed to the staff's commitment. The staff were experienced and highly qualified and had educational backgrounds in psychology, social **work**, education, and human development. In addition, a distinct cultural phenomenon was **observed** among the staff. **The staff related to and** interacted with one another as members of an extended family would, a sociocultural phenomenon known as familism, which is observed on the island and among Hispanic groups. Through familism, members in a community are

viewed as an extension of their family and community. PARE staff also did not experience cultural or language barriers between staff programs and clients.

In addition to the 702 volunteers who were recruited and trained for the Parent Aid Program during the demonstration period, PARE worked with ACTION volunteers who were assigned to assist in fundraising, community development at one public housing project in Carolina, and the public awareness campaign. PARE provided specialized training for these assignments. The volunteers were instrumental in assisting with PARE's major activities such as the annual children's event and during holiday celebrations. With the volunteers' assistance, ESCAPE was able to increase community participation and decrease staffing requirements for the demonstration project.

COMMUNITY COLLABORATION AND LINKAGES

ESCAPE has established strong collaborative ventures with Puerto Rican government agencies and the private sector. ESCAPE staff formed a task force to network with a variety of organizations; many services provided to the participating families resulted from linkages and relationships established **by the task force**. ESCAPE has formal interagency agreements with the Department of Social Services and informal linkages with the following organizations:

- Casa Protegida Julia de Burgos (domestic violence shelter);
- Head Start Program;
- Public schools;
- Health clinics;
- Centro de Ayuda a Víctimas de Violación (rape crisis center);
- Instituto del Hogar (family services);
- Department of **Social Services**;
- Centro Médico (medical center);
- Centro Ser de Puerto Rico (educational center for individuals with disabilities);
- Programa P.A.N.A. (**Prevención** de Suicidio) (adolescent suicide prevention program); and

- Programa APNI (Asociación de Padres Pro-Bienestar de Niños Impedidos) (association of parents with children with disabilities).

The project director and other staff served on committees to conduct outreach and to network with other programs. Staff also attended and presented at local, regional, and national conferences.

PROGRAM EVALUATION

PARE's evaluation included a process evaluation and an outcome evaluation focused on three components—the respite centers, the Parent Aid Program, and the two curricula (i.e., life skills curriculum [“Cuidate Mucho”] and educational curriculum for prenatal clinics [“Punto de Partida”]). The process evaluation sought to answer the following questions: Who participates in the planning? What is proposed? How is it carried out? and What is the resulting strategy? The outcome evaluation sought to answer the following questions: How did the clients change upon receiving the program services? and What will they be like after having received different services? The following sections describe PARE's process and outcome evaluations.

Process Evaluation

The process evaluation was conducted for all seven program components (i.e., interagency task force, public awareness campaign, respite centers, life skills curriculum, educational curriculum for prenatal clinics, Parent Aid Program, and Parent Laboratory). It involved identifying how the interventions were implemented, client satisfaction, the level of service provided, and the grantee's progress toward achieving program objectives. Data on program activities, volunteer contacts with the participants, individual and family participation, and staff activities and meetings were collected by the program staff. The program used several mechanisms to facilitate evaluation activities, including an automated database containing data entry screens for whole family and individual

family member information; profile information; volunteer information; staff activities; case referral, screening, assignment, and closing; and curriculum evaluation forms. Weekly staff meetings provided an opportunity for the staff to discuss program operations, activities, implementation, and future directions. The project director also conducted informal meetings with staff members to assess the effectiveness of the various activities. Quarterly reports describing progress in attaining the program's objectives also were used for the process evaluation. PARE! staff were required to note the number of interventions and services provided.

During the implementation of the school-based component, program staff conducted numerous meetings with Puerto Rican government representatives and organizations to plan and implement the training of school staff, starting with social workers who in turn trained schoolteachers. Extensive feedback from teachers and experts in education was used in the development and adoption of the school curriculum.

Also during implementation of the school curriculum, a focus group was conducted with the teachers and school staff to obtain feedback on the effectiveness of the curriculum and the knowledge test administered to the participating students. Changes suggested by the teachers were incorporated into the curriculum.

A similar process of meetings and focus group discussions took place during the implementation of the curriculum for prenatal clinics. In addition to that process, the program conducted a needs assessment to determine gaps in information being provided at the clinics that should be incorporated into the curriculum. The curriculum was field-tested at public clinics in Guaynabo and Carolina. A questionnaire was administered to 16 staff members from the participating public clinics to assess the curriculum's effectiveness. They provided positive feedback, and their suggestions were incorporated into the curriculum.

The implementation of the respite centers involved multiple meetings with the ministers from the

churches and their governing boards for planning and approval. The process included obtaining their feedback and incorporating any changes to develop a feasible program that would be accepted by all parties.

The process evaluation of the respite centers focused on client satisfaction and participation. A questionnaire was developed by the outside evaluator to determine the reasons parents used the center, available alternatives for child care, and ways in which services were helpful to families. In addition, the evaluator examined daily sign-in sheets and drop-in tracking forms. Personal interviews were conducted with the pastors of the three churches involved in this component to determine community acceptance and to obtain more information on church commitment and institutionalization of the program.

For the Parent Aid Program, a record was kept for each new mother that included her profile, demographics age, interventions received, and progress notes from the volunteer working with her. Data also were collected on clients' participation in feedback on program activities.

The process evaluation of the prenatal curriculum revealed the limitations of the physical facilities of the public clinics in Puerto Rico as well as staff and resource limitations. For example, some clinics were understaffed, and some clinics did not have room for meetings nor did they have audiovisual equipment to complement the curriculum.

Outcome Evaluation

The outcome evaluation focused on the four components of the PARE model-the respite centers; the prenatal curriculum, "**Punto de Partida**"; the school curriculum, "**Cuídate Mucho**"; and the parent aide program-which had the greatest probability of yielding significant information about the interventions. The evaluation followed a nonexperimental design, in which no comparison groups were utilized. This lack of comparison groups greatly reduces the

robustness of the evaluation findings. Nonetheless, the project's evaluators reached some conclusions about the effects of the various components, as follows:

Respite Centers

A questionnaire was administered which obtained information on what motivated the families to use the services, what they would have done if the services of the center had not been offered, and how they evaluated the quality of the centers' services. The questionnaire was administered to 141 parents between January 1, 1993 and December, 1994. The evaluation did not collect data on other variables that could have yielded outcome data, such as levels of family stress before and after using the service, family functioning, family changes during the period of program participation, or stress levels among families who used the center more often compared to stress levels among families who used the center less often.

The evaluation report concluded that based on the participants' ratings, the centers appeared to have helped the participants by preventing situations that resulted in stress for mothers caring for their children, which could lead to the mothers abusing or neglecting their children. The participants rated the quality of the centers' services as excellent. The category receiving the lowest rating was the physical facilities, due to the lack of paint and inaccessibility for persons with disabilities.

Prenatal Curriculum

The evaluation of "**Punto de Partida**" sought to demonstrate that high-risk women who received a curriculum designed to provide basic knowledge about child development, prenatal care, and well-baby care would experience strengthened mother-child relations. Pretest and posttest data collection obtained information on knowledge of the cognitive concepts presented in the curriculum. The test contained 28 questions, 4 for each of the 7 lessons in the curriculum. The test was administered before the first lesson and after the

seventh and final lesson. A total of 96 women completed the pretest and 69 completed the posttest, with no comparison group. No data were available on extent of participation in the program. The evaluation report concluded that, based on increases in the participants' scores from pretest to posttest, the curriculum did increase their knowledge about the behavior of children under stress and how to control children's behavior without becoming abusive.

School-Based Educational Curriculum on life Skills

The evaluation of "Cuidate Mucho" sought to demonstrate that children who received the curriculum acquired knowledge about the different types of child abuse and learned how to protect themselves from risky situations. Pretest and posttest data were collected on participating children. The questionnaire covered cognitive knowledge of the content of the curriculum. A sample of 407 students (kindergarten through sixth grade) from 9 schools received the curriculum and participated in the evaluation. Pretest data were collected from a comparison group, but no posttest data were collected. The evaluation report concluded that based on increases in the scores of children in kindergarten through second grades, the curriculum did increase the knowledge that children in those grades had about some child abuse risk factors and self-protective behaviors.

Parent Aides for Adolescent Mothers

Pretest and posttest data on self-esteem were collected from 15 participants using the Piers-Harris Self Concept Scale. To evaluate bonding, an expert on the topic of bonding viewed preprogram and postprogram videotapes showing the 15 mothers interacting with their infants. The general conditions of the mothers, children, and families were evaluated using an instrument on "Determining Needs and Goals," which was administered to 12 mothers. All were used at the beginning of the parent aide involvement and at the end.

The evaluation report concluded that (1) there was no significant difference between pretest and posttest results of the Piers-Harris Self Concept scale; (2) the videotapes of mother-infant interactions suggested that there was an improvement in bonding behavior from the first to the second taping for four of the mothers, positive bonding behavior was apparent in both tapings for seven of the mothers, and the remaining two mothers showed a decrease in bonding behavior from the first to the second taping, probably due to depression, uncomfortableness, insecurity, and ambivalence; and (3) the assessment of needs and goals revealed that there was progress in the achievement of goals and satisfaction of the needs of the mothers.

FINDINGS

Overall., PARE was a successful program. It can be credited with establishing new models and approaches for child abuse prevention on an island experiencing rapid industrial change, which has resulted in myriad social problems, and facing limited resources to combat child abuse. The process and outcome evaluations of PARE produced the following findings:

- The program was successful in implementing a number of components to comply with the goals and objectives of the original grant proposal.
- The program pioneered new concepts and approaches to providing secondary prevention through the development and implementation of three respite centers.
- The program successfully recruited and trained 702 volunteers from the community who provided support services and served as role models for a high-risk segment of the population.
- The program successfully identified local funding to support its efforts and, with the NCCAN grant, expanded services.

- The program gained the support of the community and government officials, and private and public agencies joined them to create a task force.
- The program gained the support of the business community and the media. The business community donated person hours, time, money, furniture, toys, and food to the program. The media donated person hours, time, and space for the public awareness campaign.
- The program presented a successful public awareness campaign, which was broadcast throughout Puerto Rico and reached a large segment of the population. An outside evaluation conducted by students from the University of Puerto Rico's Marketing Department demonstrated that in a random sample of children ages 4 to 12 in Carolina, 85 percent identified the subject of the campaign and remembered significant segments of the campaign.
- The program extended its limited resources to serve one additional community outside the targeted community. The request for services at the beginning was overwhelming, resulting in the opening of a fourth office on the west side of the island.
- Parts of the evaluation failed to demonstrate the effectiveness of the Parent Aid Program interventions because of limitations in the evaluation design and reporting, including the following:
 - Test results failed to demonstrate any significant changes in self-esteem after the intervention;
 - The evaluator did not conduct an in-depth study of the individual characteristics of the mothers or include that information in the final assessment; and
 - The mothers were tested too late in the evaluation process.
- Evaluation was limited by the lack of culturally sensitive instruments that could be applied to the population in Puerto Rico.

Analysis of the Findings

Data from the evaluation were inconclusive regarding significant changes in the frequency of child abuse among participating families or within the targeted population. However, in terms of changes at the community level, the data support the general perception of most interviewees—that the program promoted changes in community involvement and community awareness. Collaboration among agencies to coordinate prevention efforts increased, and supportive services for families at risk through three respite centers were institutionalized.

Overall, due to the community changes noted above, the project staff concluded that the program model in use at the end of the grant period was an effective child abuse prevention program. The program implemented seven components, filling gaps in services and bringing new models and approaches to child abuse prevention on the island. The components were implemented with limited funding, staffing, and equipment.

Findings related to the Parent Aid Program deserve further analysis. The research question for this component presumed that new mothers who entered the program had low self-esteem, which improved after intervention by the volunteers. Results from a pretest administered to 14 new mothers demonstrated high self-esteem for all 14 mothers. After receiving the intervention, the mothers were tested again **using** the Pier Harris Self-Concept Scale. No significant differences were found in the results of the **posttest** administered to the same group of mothers. Possible explanations for these results include the size of the sample, appropriateness of the test, and cultural issues. **Results** also may be attributed to the excitement of having their first baby, which they all wanted to have. For some teenagers, having a baby provides adult status, they feel realized as mothers, and/or it is the right thing to

do in their class subculture. Having a baby also may help them get the boyfriend they want or the attention they need.

In addition, the test might not address the cultural nuances of the Puerto Rican culture. No information was available on the effectiveness of the English-to-Spanish translation of the instrument or the appropriateness of the instrument in testing how Puerto Ricans attain a “good” self-image.

Another factor to consider is the age group targeted by this test, which includes teenage mothers who have dropped out of school. The Pier Harris test is recommended for middle-school students and has not been validated with Puerto Ricans. The maternal self-esteem test was used with Puerto Rican populations in New York, but no reference data were available to make comparisons. This is significant because Puerto Ricans- in New York can be vastly different from Puerto Ricans on the island.

Additional gains from the program were not measured by the tests. For example, teenage mothers gained significant knowledge and insight about positive parenting from their relationships with volunteers. A high percentage of participants were able to establish goals and fulfill them by developing problemsolving skills. These teenage mothers worked with volunteers who served as role models and provided a way to achieve goals established by higher status groups that were unavailable to them elsewhere.

Although no hard data exist to document any significant outcomes from the Parent Aid Program component, record review, case studies, and focus groups with parents supported the perception that the participating mother benefited from the volunteer’s assessment. The volunteers were better able to identify possible risky conditions leading to child abuse or neglect, such as overcrowded conditions, poor parenting skills, and poor nutrition. The benefits from the volunteer’s assessment and counseling ultimately may have produced a trickle-down effect so that the entire family benefited from the relationship and

knowledge gained by the participant. In fact, it is plausible to assume that the program impacted entire families. Through the volunteers, the program provided role models who offered new perceptions and attitudes for program participants.

PARE also successfully implemented the concept of respite centers as a supportive program for low-income families in San Juan, Carolina, and Guaynabo. At the community level, the partnership between ESCAPE and the churches evidenced community empowerment and involvement. However, findings at the individual level were inconclusive. Variables that could have yielded outcome data were not measured (e.g., stress level and family functioning) before and after the intervention.

In addition to the families who received direct services, the entire community was impacted through an intensive public awareness campaign conducted through the media. Educational presentations were provided through the Parent Laboratory, which provided information to service providers and professionals in the field. Written materials were developed by the program as a way to target parents and the community at large.

Implementation of the school-based curriculum involved strategic planning and interviews with the participating teachers and social worker. A questionnaire was developed and submitted to teachers asking them about their experiences administering the curriculum. Results from the evaluation and tests administered to the students demonstrated that the curriculum was more effective with students in kindergarten and grades 1 through 3 than with older students. It may be that the knowledge and skills taught through the curriculum had already been acquired by children in higher grades.

Hindering Factors

The evaluation design was all encompassing, but resources were very limited. The evaluation of the curricula, which had to rely on other agencies outside the project such as public clinics and public

schools, often faced resistance from overworked staff. In addition, participation in the project was voluntary, and participants were not always willing or available to participate in the evaluation study.

The evaluation design faced limitations because of the lack of instruments that were available in Spanish, culturally sensitive, and validated with Puerto Ricans on the island. The evaluator and the site visit team identified several instruments that had been translated into Spanish but found no information about the quality of the translation.

Another difficulty encountered was the selection of variables from the large number of possible variables that could demonstrate change. For example, although several aspects of the participating new mothers' lives improved with aid of the volunteers, the program chose to study self-esteem. It was assumed that teenage mothers came to the program with low self-esteem, yet the test results proved otherwise.

During the evaluation the project also encountered difficulties in recruiting subjects, and not enough time was allocated for recruitment, selection, and testing. In addition, the project experienced a slow referral process from social services and community-based organizations.

Staff changes in the Departments of Education and Social Services resulted in delays in procedures at all levels, and the focus and mission of the departments changed with each new administration. The changes impacted implementation of the curricula as well as task force efforts and collaboration with government agencies.

The target population for the curricula also proved to be overwhelming. The sample included 470 children from 9 schools. The implementation involved arduous work, and the process was complex.

Strengthening Factors

Recent research suggests that child maltreatment is symptomatic of not only individual or family

trouble but of neighborhood and community trouble as well (Garbarino and Kostelny, 1992). The PARE model followed an ecological approach, working with at-risk families and developing working relationships, and collaborated with other public and private agencies to promote additional community efforts. The project worked with the main government agencies charged with providing services to children and families. PARE involved the business sector, which provided donations of furniture, snacks, refreshments, money, and person hours during selected events. PARE also worked effectively with the faith community; three local churches joined the program to establish respite centers.

One important outcome was the development of the first child abuse task force on the island. PARE was able to eliminate turf issues early in demonstration period, winning the trust and cooperation of many public and private organizations. Because resources were scarce in this community, public and private organizations and other organizations (e.g., nonprofits) benefitted from the services provided by the demonstration project.

Factors that facilitated the recruitment of a large number of volunteers included the commitment and enthusiasm of the staff, who established strong collaborative relationships and networks with other organizations and community members. The staff and volunteers built trust among participating families and community members.

Finally, one must comprehend values that guide a community to support approaches and visions. A sense of what sociologists have called spiritualism and familism is an integral part of Puerto Rican culture. Strong family values still exist and therefore can be called on to support and sustain family members. Even though sectors of the targeted community suffered from concentrated poverty and social disorganization, other sectors evidenced a strong social fabric through which traditional values, stability, and order prevailed. PARE connected the affluent with the poor and the strong with the weak, tapping into human resources

to alter the community climate, a move that resulted in changes of community dynamics that damage the lives of children and families of these communities.

INSTITUTIONALIZATION

The components of this program continue to operate beyond the demonstration period through a combination of funding arrangements secured by the project director. The difficult task of securing funds was accomplished at the beginning of the demonstration period, after ESCAPE received the NCCAN grant.

The three respite centers initiated by PARE currently are in operation, partly funded by the Oficina de Servicios al Niño y Desarrollo Comunal (SENDEC), the **Commonwealth** Office of Child Development. SENDEC continues to fund the respite centers, but the funding has **decreased** due to cuts in government funding. However, SENDEC's contributions represent the respite centers' major **source** of support. The churches also were called on to take total financial responsibility for the respite centers, and the three churches involved are in the process of identifying sources of funding to sustain their own centers. For example, the Carolina center **obtained** private donations, and the pastor from another center submitted a proposal to a **local** bank requesting a \$5,000 grant with which to pay staff salaries (with other expenses to be absorbed by the church). Although the San Juan center is not ready to assume total financial responsibility, 'the pastor had expressed commitment to continue **supporting** the center and to eventually assume full responsibility.

The prospect of establishing more respite centers throughout Puerto Rico looks promising. SENDEC requested technical assistance for establishing a respite center in a housing project that was taken over by the National Guard and the police because of the high concentration of drug activity. The (center will serve children of substance-abusing parents while their parents participate in outpatient

detoxification programs. ESCAPE provided technical assistance and guided the department through the implementation process. In addition, a local foundation approached ESCAPE and provided a grant to establish a respite center in another high-risk community. The program is in the process of conducting a needs assessment before it implements the program.

Project staff believed that the respite center component had good potential for expansion; three additional respite centers are in the planning stages. As a result, other sectors of the community with pro-child ideologies are adopting their model. The centers not only provide a needed service but are providing support to families, a step toward restoring the community's nurturing aspects and building a "sustainable society." There is no doubt that ESCAPE and the PARE program have contributed much needed social resources.

The "Cuidate **Mucho**" school curriculum is now used in several schools to reach children with special needs (e.g., visual and hearing impairments, mental disabilities, and developmental delays). ESCAPE obtained a Federal grant to implement the curriculum, which also is being used to fund a public campaign to increase awareness of the special needs of children with disabilities.

The "Punto de **Partida**" curriculum for pregnant women still is used at some of the public clinics where it originally was introduced. Dr. Roberto Varela, Director of the Division of Mothers and Children of the Commonwealth Health Department, has favorably evaluated the curriculum **and** recommended its adoption in all the public prenatal clinics on the island.

ESCAPE has created an institute for resources and training called Instituto de Recursos y Adiestramiento. The organization combined all its public education materials to establish a library and clearinghouse, which holds all educational materials developed by ESCAPE on child abuse. These educational materials were integral to the public education campaign. In addition, the staff identified other materials that were effective in

educating the public and increasing awareness. These resources are in high demand from ESCAPE, as it still is the main organization on the island offering child abuse prevention services. Two volunteers from a senior citizen project with library science backgrounds are organizing the materials in an effort funded by a grant received after the NCCAN grant ended.

Committees from the interagency task force continue to meet to address the need to improve child abuse reporting in their agencies. Representatives from the Police Department have continued to review internal child abuse-reporting policies.

ESCAPE has demonstrated that a combination of staff commitment, community collaboration, and volunteer involvement can generate positive results. Its interventions were innovative and contributed to increased awareness and community involvement. ESCAPE has inspired other organizations to start similar programs, and several organizations have begun operations to provide counseling and crisis intervention.

CONCLUSION

Given that PARE was able to recruit a significant number of volunteers and that many sectors of the community became involved in child abuse prevention efforts, it can be concluded that child abuse awareness increased in Puerto Rico as a result of the PARE demonstration grant. Still, more work needs to be done before child abuse prevention becomes a priority for the leaders and politicians on the island.

PARE showed that a combination of staff commitment, community collaboration, and volunteer involvement can generate positive results. Their interventions were both innovative and effective, and they contributed to increased awareness, interagency collaboration and linkages, family support, and community involvement. PARE inspired other organizations to start similar programs, and several organizations have begun

operations to provide counseling and crisis intervention.

PARE developed several exemplary practices, including the following:

- *Collaboration with churches.*-Three respite centers were created in three high-risk communities as a result of collaboration with churches. As social changes on the island disrupt family traditions and community stability, churches are developing a pattern of involvement in social action. That pattern was evident with the churches that sponsored the three original centers. As the community learns about the successes of this new approach, other programs are replicating the centers, the result being the implementation of three new respite centers. The added support to families provided by the respite centers may result in the strengthening of families and changes in the social fabric of disorganized communities.
- *Interagency Task Force.*-Another successful practice was PARE's Interagency Task Force, which was composed of key government agencies and private organizations that provided services to children and families. The task force can be credited for promoting collaboration and bringing key government representatives together to focus on issues pertaining to child abuse prevention. A network emerged that improved interagency communication and collaboration and promoted changes within some of the organizations represented on the task force.
- *Volunteers.*-The volunteers were able to offer extended hours of service beyond normal business hours. They assumed a variety of roles, often assisting families in the setting where they have the greatest need-their homes. Volunteers also served as role models, providing a different point of view on childrearing practices, which was vital for multiproblem families experiencing family dysfunction and living in unstable home situations. On another front, trained volunteers

spread child abuse prevention messages in the community, promoted community involvement, and increased child abuse awareness.

In addition, research projects like PARE provided an opportunity for expanding the knowledge base in areas such as parenting, childrearing practices, the role of the faith community, cultural values, and protective factors. It is likely that the information gained would benefit service providers as well as the general public.

Overall, ESCAPE's **success** related to the staffs ability to adapt the program to the reality of the community they served. The strategies were culturally appropriate, which contributed to the acceptance of the program. In Puerto Rico, even though sectors of the targeted communities suffered from concentrated poverty and social disorganization, other sector's evidenced a strong social fabric through which traditional values, stability, and order prevailed. PARE was successful because it tapped into those sectors of the community that were still strong and maximized community resources to strengthen the entire community by providing support to families in need, expanding services, and increasing the knowledge of child abuse.

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